AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No.		
Applicant(s): Andreas Witzel, et al.					P17157-US1		
Application No.	Filing Date	Examiner	Customer N	10. G	Froup Art Unit	Confirmation No.	
10/516,866	12/03/2004	Kwasi Karikari	27045		2617	2414	
Invention: OPERATING OF A SWITCHING NODE IN A COMMUNICATIONS NETWORK COMPRISING BOTH A LAYERED AND A NON-LAYERED ARCHITECTURAL ENVIRONMENT							
COMMISSIONER FOR PATENTS:							
Transmitted herewith is an amendment in the above-identified application.							
The fee has been calculated and is transmitted as shown below.							
CLAIMS AS AMENDED							
	CLAIMS REMAINING	HIGHEST#	NUMBER EXTRA	R	DATE	ADDITIONAL	
	AFTER AMENDMENT	PREV. PAID FOR	CLAIMS PRESENT		RATE	FEE	
TOTAL CLAIMS	21 -	41 =	0	x	\$50.00	\$0.00	
INDEP. CLAIMS	2 -	5 =	0	x	\$200.00	\$0.00	
Multiple Dependent Claims (check if applicable)							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0.00							
 ☑ No additional fee is required for amendment. ☐ Please charge Deposit Account No. 50-1379 in the amount of \$0.00 ☐ A check in the amount of to cover the filing fee is enclosed. ☑ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1379 ☑ Any additional filing fees required under 37 C.F.R. 1.16. ☑ Any patent application processing fees under 37 CFR 1.17. Signature Dated: October 20, 2008 Signature							
Reg No. 45,602	Certificate of Mailing or Transmission						
Ericsson Inc. 6300 Legacy Driv Plano, TX 75024	I hereby certify that this correspondence is being deposited with the United Sates Postal Service with sufficient postage for First class or Express Mail in an envelope addressed to Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted, or transmitted via EFS-Web to the USPTO, on the date indicated below.						
Pam Ewrix							
Signature							
cc:	Pam Ewing October 20, 2008 Depositors's Name and Date						
	Dehosunis 2 Lunie aun Date						